Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is a amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's nase or passport).  g your picture attification to your eting with the trustee.	Marcy First name  L Middle name  Miramon Last name and Suffix (Sr., Jr., II, III)	Todd First name  A Middle name  Miramon  Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.	FKA Marcy L Campbell	
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-6076	xxx-xx-7699

Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 2 of 81

**Todd A Miramon** Debtor 2 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2419 Heatherwood Ct Escondido, CA 92026 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code San Diego County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Marcy L Miramon

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	tor 1 tor 2	Todd A Miramon					Case r	number (if known)		
Part	2:	Tell the Court About	our Bank	ruptcy Ca	se					
7.	Bank	chapter of the cruptcy Code you are sing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	CITOC	and to me under	■ Chap	ter 7						
			☐ Chap	ter 11						
			☐ Chap	ter 12						
			☐ Chap	ter 13						
8.	How	you will pay the fee	abo ord	out how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	, cashier's check, or money	
					the fee in installments. If ye in Installments (Official Form		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			☐ I re	equest that is not requ plies to you	t my fee be waived (You ma uired to, waive your fee, and r ur family size and you are una on to Have the Chapter 7 Filin	y request may do so able to pay	only if your incom the fee in install	me is less than 150% o ments). If you choose t	of the official poverty line that his option, you must fill out	
9.	Have you filed for No.									
	bankrupto last 8 year	ruptcy within the 3 vears?	Yes.							
		,,		District	Southern District of California	When	2/27/19	Case number	19-01047 (Dismissed)	
				District	Southern District of California	- When	2/12/18	Case number	18-00767 (Dismissed)	
				District	See Attachment	When		Case number		
10.		any bankruptcy s pending or being	■ No							
	filed not f you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.							
				Debtor				Relationship to y		
				District		_ When				
				Debtor		14/1		Relationship to y		
				District		_ When		Case number, if	known	
11.		ou rent your lence?	□ No.	Go to li	ne 12.					
	16910	::::::::::::::::::::::::::::::::::::::	■ Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you?			
					No. Go to line 12.					
					Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this	

Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 4 of 81 Debtor 1 Marcy L Miramon Debtor 2 Todd A Miramon Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Marcy L Miramon
Debtor 2 Todd A Miramon

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 6 of 81

	otor 1 otor 2	Marcy L Miramon Todd A Miramon			Ca:	se number (if ki	nown)	
Part	t 6:	Answer These Questi	ons for Re	porting Purposes				
16.		kind of debts do nave?		Are your debts primarily consur individual primarily for a personal,			n 11 U.S.C. § 101(8) as "incurred by an	
				☐ No. Go to line 16b.				
				Yes. Go to line 17.				
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
				☐ No. Go to line 16c.				
				☐ Yes. Go to line 17.				
			16c.	State the type of debts you owe th	at are not consumer debts o	or business de	bts	
17.		ou filing under ter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	after	ou estimate that any exempt erty is excluded and		I am filing under Chapter 7. Do you are paid that funds will be available			s excluded and administrative expenses	
	admi	administrative expenses		■ No				
	be av	aid that funds will railable for bution to unsecured tors?		□ Yes				
18.		How many Creditors do you estimate that you owe?	<b>1</b> -49		<b>1</b> ,000-5,000		<b>1</b> 25,001-50,000	
			□ 50-99		☐ 5001-10,000		□ 50,001-100,000 □ M	
			☐ 100-199 ☐ 200-999		□ 10,001-25,000		☐ More than100,000	
19.		much do you	<b>\$</b> 0 - \$5	0.000	□ \$1,000,001 - \$10 millio	n	□ \$500,000,001 - \$1 billion	
		nate your assets to orth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion	
		be worth:	□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.		much do you	□ \$0 - \$5	0,000	□ \$1,000,001 - \$10 millio	n	□ \$500,000,001 - \$1 billion	
	estin to be	ate your liabilities ?		1 - \$100,000	□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion	
				01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 mil □ \$100,000,001 - \$500 m		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
			<b>□</b> \$500,0	O I - \$1 million			— Word than good simen	
Part	t 7:	Sign Below						
For	you		I have exa	mined this petition, and I declare u	under penalty of perjury that	the informatio	n provided is true and correct.	
				nosen to file under Chapter 7, I am tes Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.	
				ney represents me and I did not pa I have obtained and read the noti			attorney to help me fill out this	
			I request r	elief in accordance with the chapte	er of title 11, United States C	ode, specified	in this petition.	
							perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,	
			/s/ Marcy	L Miramon		A Miramon		
				<b>Miramon</b> of Debtor 1		Miramon of Debtor 2		
			Executed	August 31, 2019  MM / DD / YYYY	Executed	on August		

# Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 7 of 81

Debtor 1 Debtor 2 Marcy L Miramon Todd A Miramon		Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e that I have delivered to the o	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the information in the		
. •	/s/ Brian Crozier Whitaker	Date	August 31, 2019		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Brian Crozier Whitaker 183350				
	Printed name				
	Lifeline Legal, LLP				
	9665 Chesapeake Dr #345				
	San Diego, CA 92123				
	Number, Street, City, State & ZIP Code				
	Contact phone <b>858-560-4335</b>	Email address	brian@lifelinelegal.com		
	183350 CA				
	Bar number & State		<del></del>		

### Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 8 of 81

Case number (if known)

Fill in this infor	mation to identify your	case:		
Debtor 1	Marcy L Miramon	ì		
	First Name	Middle Name	Last Name	
Debtor 2	<b>Todd A Miramon</b>			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	
Case number (if known)				☐ Check if this is ar
				amended filing

#### FORM 101. VOLUNTARY PETITION

### **Prior Bankruptcy Cases Filed Attachment**

District	Case Number	Date Filed
Southern District of California	19-01047 (Dismissed)	2/27/19
Southern District of California	18-00767 (Dismissed)	2/12/18
Southern District of California	17-00979 (Dismissed)	2/27/17

Marcy L Miramon

Debtor 2 Todd A Miramon

Debtor 1

Fill in	this inform	ation to identify your o	case:			
Debto		Marcy L Miramon				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	Todd A Miramon First Name	Middle Name	Last Name		
	•	kruptcy Court for the:	SOUTHERN DISTRIC			
		., .,				
Case (if know	number <sub>n)</sub>				_	k if this is an
					amon	aca ming
Offi.	oial Ear	m 1065um				
		m 106Sum	and Liabilities a	nd Certain Statistical Information		40/45
				le are filing together, both are equally responsible		12/15 na correct
inform	ation. Fill o	ut all of your schedule	es first; then complete	the information on this form. If you are filing amen		
your o	_	•	new Summary and che	ck the box at the top of this page.		
Part 1	: Summa	rize Your Assets				
					Your a	
					value	of what you own
		<b>'B: Property</b> (Official Fo 55, Total real estate, fr			\$	0.00
1	lb. Copy line	e 62, Total personal prop	perty, from Schedule A/B	3	\$	26,998.00
1	Ic. Copy line	e 63, Total of all property	on Schedule A/B		\$	26,998.00
Part 2	Summa	arize Your Liabilities				
					Your I	iabilities
						nt you owe
			aims Secured by Proper		\$	42.421.00
		•		It the bottom of the last page of Part 1 of Schedule D	Ψ	,
			<i>Unsecured Claims</i> (Offici 1 (priority unsecured clai	nal Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	56,938.00
3	Bb. Copy the	e total claims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	110,491.00
				V		
				Your total liabilities	5 5	209,850.00
Part 3	Summa	arize Your Income and	Expenses			
4. 3	Schedule I: \	Your Income (Official Fo	rm 106l)			
(	Copy your co	ombined monthly income	e from line 12 of Schedu	le I	\$	7,134.50
		Your Expenses (Official onthly expenses from lin			\$	7,505.00
Part 4	Answei	r These Questions for	Administrative and Sta	ntistical Records		
	-		er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form to the court with you	our other sc	hedules.
7. <b>\</b>	■ Yes What kind o	f debt do you have?				
	■ Your de	ebts are primarily cons	sumer debts. Consume	r debts are those "incurred by an individual primarily fo	r a personal	, family, or
				-9g for statistical purposes. 28 U.S.C. § 159.	. ,	, <b>,</b> , <del></del>

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Debtor 2	Todd A Miramon	Case number (if known)	
	n the <i>Statement of Your Current Monthly Income</i> : Co A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 I	,	\$ 8,831.66

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Marcy L Miramon

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	6,974.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	49,964.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	56,938.00

Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 11 of 81

Fill in this in	formation to identify your c	ase and this filing:		
Debtor 1	Marcy L Miramon			
	First Name	Middle Name Last Name		
Debtor 2	Todd A Miramon	Middle News		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number				☐ Check if this is an amended filing
				ae.raeag
Official F	Form 106A/B			
Sched	ule A/B: Prope	erty		12/15
think it fits besi information. If i Answer every q	t. Be as complete and accurate more space is needed, attach a juestion.	items. List an asset only once. If an asset fits in more than as possible. If two married people are filing together, both separate sheet to this form. On the top of any additional pa	are equally responsible for su	pplying correct
		Land, or Other Real Estate You Own or Have an Interest In		
1. Do you own	or have any legal or equitable	interest in any residence, building, land, or similar property	?	
No. Go to	Part 2.			
☐ Yes. Whe	ere is the property?			
D. (0 D.)	T. W. William			
Part 2: Descr	ibe Your Vehicles			
Do you own,	lease, or have legal or equi	table interest in any vehicles, whether they are regis	tered or not? Include any ve	ehicles you own that
someone else	drives. If you lease a vehicle	, also report it on Schedule G: Executory Contracts and	Unexpired Leases.	
3. Cars, vans	s, trucks, tractors, sport util	ity vehicles, motorcycles		
<b>-</b>	-			
□ No				
Yes				
			Do not doduct accured al	nime or examptions. But
3.1 Make:	Volkswagen	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
Model:	Jetta SE Sedan	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
Year:	2014	Debtor 2 only	Current value of the	Current value of the
	mate mileage: 115,0		entire property?	portion you own?
	nformation:	At least one of the debtors and another		
(Need	s New Engine)	Check if this is community property (see instructions)	\$1,762.00	\$1,762.00 
	Toyoto		Do not deduct secured cla	aims or exemptions. Put
3.2 Make:	Toyota  4Pupper SP5	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
Model:	4Runner SR5	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
Year:	2007	Debtor 2 only	Current value of the	Current value of the
	imate mileage: 188,0	Dobler I and Dobler 2 only	entire property?	portion you own?
Other in	nformation:	At least one of the debtors and another		
		Check Walte to as your 2	\$4,948.00	\$4,948.00
		■ Check if this is community property  (see instructions)		φ <del>+</del> ,σ+υ.υυ

Official Form 106A/B Schedule A/B: Property page 1

Debtor Debtor		Marcy L Miramon Todd A Miramon	Case number (if known)	
		aircraft, motor homes, ATVs and other recreational vehic soats, trailers, motors, personal watercraft, fishing vessels, sno		
■ N	lo.			
ш т	62			
		ollar value of the portion you own for all of your entries fron have attached for Part 2. Write that number here		\$6,710.00
Part 3:	Descri	ibe Your Personal and Household Items		
Do yo	u own o	or have any legal or equitable interest in any of the followi	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	amples: No	goods and furnishings Major appliances, furniture, linens, china, kitchenware		
		Household Goods and Furnishings		\$1,000.00
Exa	No	Televisions and radios; audio, video, stereo, and digital equipment including cell phones, cameras, media players, games escribe	ment; computers, printers, scanners; music co	illections; electronic devices
		Miscellaneous Electronics		\$500.00
Exa	amples: No	s of value Antiques and figurines; paintings, prints, or other artwork; boo other collections, memorabilia, collectibles	ks, pictures, or other art objects; stamp, coin,	or baseball card collections;
Exa	amples:	for sports and hobbies Sports, photographic, exercise, and other hobby equipment; b musical instruments escribe	icycles, pool tables, golf clubs, skis; canoes a	nd kayaks; carpentry tools;
		Miscellaneous Sports and/or Hobby Ed	quipment	\$25.00
11. <b>Clo</b>	xamples No Yes. De othes xamples	es: Pistols, rifles, shotguns, ammunition, and related equipment escribe  Es: Everyday clothes, furs, leather coats, designer wear, shoes,	accessories	
<b>-</b>	res. De	Miscellaneous Clothes and Shoes		\$300.00
12. <b>Je</b> v	welry			

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

page 2

	btor 1 btor 2	Marcy L Mi Todd A Mir			Case number (if known)	
	Yes.	Describe				
			Misce	llaneous Jewelry	,	\$100.00
	Exam <sub>l</sub> □ No	arm animals ples: Dogs, cats Describe	s, birds, ho	ses		
			Jack F	Russell/Chihuahu	ua Mix Dog, 2 Guinea Pigs & Persian Mix Cat	\$0.00
	■ No	ther personal a			not already list, including any health aids you did not list	
15					art 3, including any entries for pages you have attached	\$1,925.00
Pa	rt 4: De	escribe Your Fina	ancial Asset	s		
					any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petiti	ion
					Cash on Hand	\$100.00
					ounts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
					Institution name:	
			17.1.	Checking	Chase Bank San Diego, CA	\$0.00
			17.2.	Checking	Net Spend Loadable Debit Card	\$75.00
18.	Exam			ely traded stocks ent accounts with bro	okerage firms, money market accounts	
	■ No □ Yes.			Institution or issuer	name:	
19.	-	ublicly traded : venture	stock and	interests in incorpo	orated and unincorporated businesses, including an interes	st in an LLC, partnership, and
	_	Give specific i		about them ne of entity:	% of ownership:	
	Negot	tiable instrumen	ts include p	ersonal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. shiers to someone by signing or delivering them.	

Official Form 106A/B Schedule A/B: Property page 3

Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 14 of 81 Debtor 1 Marcy L Miramon **Todd A Miramon** Debtor 2 Case number (if known) ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **DRS Employee Stock Digital Retirement Solutions, Inc** \$15,438.00 Ownership Plan (2228) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. ..... **Rental Deposit** Kristi Walton \$2,750.00 **Escondido CA** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

☐ Yes. Give specific information.....

	ebtor 1 ebtor 2	Marcy L Miramon Todd A Miramon Case number (iii	f known)	
		amounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' benefits; unpaid loans you made to someone else	' compe	nsation, Social Security
		Give specific information		
		ts in insurance policies  les: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's	s insuraı	nce
		Name the insurance company of each policy and list its value.  Company name:  Beneficiary:		Surrender or refund value:
	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitle ne has died.	d to rec	eive property because
	☐ Yes.	Give specific information		
	Examp  ■ No	against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue		
				and off plains
	■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and r	ignts to	o set off claims
	■ No	Give specific information		
36		he dollar value of all of your entries from Part 4, including any entries for pages you have attack art 4. Write that number here	hed 	\$18,363.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.		
37.	Do you o	own or have any legal or equitable interest in any business-related property?		
ı	No. Go	to Part 6.		
[	☐ Yes. G	So to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. ou own or have an interest in farmland, list it in Part 1.		
46.	_ `	own or have any legal or equitable interest in any farm- or commercial fishing-related property	/?	
	☐ Yes.	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
53.		have other property of any kind you did not already list?  bles: Season tickets, country club membership		
	■ No □ Yes.	Give specific information		
54	. Add t	he dollar value of all of your entries from Part 7. Write that number here		\$0.00

Official Form 106A/B Schedule A/B: Property page 5

# Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 16 of 81

Deb Deb	tor 1 Marcy L Miramon Todd A Miramon	Case number (if known)			
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$6,710.00		_
57.	Part 3: Total personal and household items, line 15		\$1,925.00		
58.	Part 4: Total financial assets, line 36		\$18,363.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$26,998.00	Copy personal property total	\$26,998.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$26,998.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this information to identify your case:									
Debtor 1	Marcy L Miramon								
	First Name	Middle Name	Last Name						
Debtor 2	<b>Todd A Miramon</b>								
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF CALIFORNIA						
Case number					Check if this is an amended filing				

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2014 Volkswagen Jetta SE Sedan 115,000 miles	\$1,762.00		\$1.00	C.C.P. § 703.140(b)(2)
(Needs New Engine) Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2007 Toyota 4Runner SR5 188,000 miles	\$4,948.00		\$1.00	C.C.P. § 703.140(b)(2)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	C.C.P. § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Sports and/or Hobby Equipment	\$25.00		\$25.00	C.C.P. § 703.140(b)(3)
Line from Schedule A/B: 9.1			100% of fair market value, up to	

Official Form 106C

Debtor Debtor				Case number (if known)	
Br Sc	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	liscellaneous Clothes and Shoes ne from Schedule A/B: 11.1	\$300.00		\$300.00	C.C.P. § 703.140(b)(3)
				100% of fair market value, up to any applicable statutory limit	
	liscellaneous Jewelry ne from <i>Schedule A/B</i> : <b>12.1</b>	\$100.00		\$100.00	C.C.P. § 703.140(b)(4)
<u> </u>	The Holli Genedule 74 B. 1211			100% of fair market value, up to any applicable statutory limit	
_	ash on Hand ne from Schedule A/B: 16.1	\$100.00		\$100.00	C.C.P. § 703.140(b)(5)
<u> </u>	ne nom denedule 24 B. 16.1			100% of fair market value, up to any applicable statutory limit	
	hecking: Chase Bank an Diego, CA	\$0.00		\$1.00	C.C.P. § 703.140(b)(5)
	ne from <i>Schedule A/B</i> : <b>17.1</b>			100% of fair market value, up to any applicable statutory limit	
	hecking: Net Spend Loadable Debit ard	\$75.00		\$75.00	C.C.P. § 703.140(b)(5)
_	ne from <i>Schedule A/B</i> : <b>17.2</b>			100% of fair market value, up to any applicable statutory limit	
	RS Employee Stock Ownership lan (2228): Digital Retirement	\$15,438.00		\$15,438.00	C.C.P. § 703.140(b)(10)(E)
S	olutions, Inc ne from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	ental Deposit: Kristi Walton scondido CA	\$2,750.00		\$2,750.00	C.C.P. § 703.140(b)(5)
	ne from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption of Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covere No Yes	years after that for ca	ises fi		

Debtor 1					
	Marcy L Miramo			_	
D. I	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	Todd A Miramo	N Middle Name Last Name		-	
(Spouse II, IIIIIIg)	i iist ivaille				
United States Ba	ankruptcy Court for the	SOUTHERN DISTRICT OF CALIFORNIA		-	
Case number					
(if known)				_	if this is an
				amend	ded filing
Official Forr	m 106D				
		Who Have Claims Secure	h by Dranart	.,	40/45
Schedule	D. Creditors	Who Have Claims Secured	a by Propert	<u>y                                    </u>	12/15
	ne Additional Page, fill it	If two married people are filing together, both are eq out, number the entries, and attach it to this form. O			
, ,	s have claims secured by	vour property?			
_ `	•	nis form to the court with your other schedules. You	ou have nothing else	to report on this form.	
_		•	sa navo nonning oloo	to report our une remin	
	n all of the information	Delow.			
Part 1: List A	All Secured Claims		Column A	Column B	Column C
				Colullii B	
		more than one secured claim, list the creditor separately		Value of colleteral	
for each claim. If r	more than one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
for each claim. If r much as possible,	more than one creditor has list the claims in alphabeti	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion
for each claim. If r much as possible,  2.1 Americar	more than one creditor has list the claims in alphabeting Credit Accept	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:	Amount of claim Do not deduct the	that supports this	Unsecured portion
for each claim. If r much as possible,	more than one creditor has list the claims in alphabeting Credit Accept	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion
for each claim. If r much as possible,  2.1 Americar  Creditor's Nan	more than one creditor has list the claims in alphabeti n Credit Accept	pa particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma	more than one creditor has list the claims in alphabeti n Credit Accept ne	Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb	more than one creditor has list the claims in alphabeting Credit Accept me	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb	more than one creditor has list the claims in alphabeti n Credit Accept ne	Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb	more than one creditor has list the claims in alphabeting Credit Accept me  ain St courg, SC 29302  et, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral.	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb Number, Stree  Who owes the d	more than one creditor has list the claims in alphabeting Credit Accept me  ain St courg, SC 29302  et, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Amount of claim Do not deduct the value of collateral. \$15,010.00	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb Number, Stree  Who owes the d Debtor 1 only	more than one creditor has list the claims in alphabeting Credit Accept me  ain St courg, SC 29302  et, City, State & Zip Code	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral. \$15,010.00	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb Number, Stree  Who owes the d  Debtor 1 only Debtor 2 only	more than one creditor has list the claims in alphabeting Credit Accept me  sin St courg, SC 29302 cat, City, State & Zip Code  lebt? Check one.	Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec car loan)	Amount of claim Do not deduct the value of collateral. \$15,010.00	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb Number, Stree  Who owes the d Debtor 1 only Debtor 2 only Debtor 1 and D	more than one creditor has list the claims in alphabeting Credit Accept me  sin St courg, SC 29302 cat, City, State & Zip Code  lebt? Check one.	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec	Amount of claim Do not deduct the value of collateral. \$15,010.00	that supports this claim	Unsecured portion If any
for each claim. If r much as possible,  2.1 Americar Creditor's Nan  961 E Ma Spartanb Number, Stree  Who owes the d Debtor 1 only Debtor 2 only Debtor 1 and D	more than one creditor has list the claims in alphabeting Credit Accept me  Ain St courg, SC 29302  Let, City, State & Zip Code  Lebt? Check one.  Debtor 2 only the debtors and another claim relates to a	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.  Describe the property that secures the claim:  2007 Toyota 4Runner SR5 188,000 miles  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or sec car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$15,010.00	that supports this claim \$4,948.00	Unsecured portion If any

1001

Last 4 digits of account number

Active

Date debt was incurred 3/20/19

Debtor 1 Marcy I	_ Miramon		Case number (if known)					
First Name Debtor 2 Todd A	Middle N	lame Last Name						
First Name	Middle N	lame Last Name						
2.2 Conns Cred	lit Corp	Describe the property that secures the claim:	\$4,235.00	\$800.00	\$3,435.00			
Creditor's Name	1	Misc furniture						
3295 Colleg Beaumont,		As of the date you file, the claim is: Check all the apply.	nat					
	ty, State & Zip Code	☐ Contingent ☐ Unliquidated						
		☐ Disputed						
Who owes the debt	? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortgage car loan)	or secured					
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)					
At least one of the		Judgment lien from a lawsuit						
☐ Check if this clair community debt		☐ Other (including a right to offset)						
	Opened 09/16 Last Active							
Date debt was incurr	ed 12/31/16	Last 4 digits of account number 40	)30 					
2.3 Prestige Fir	nancial Svc	Describe the property that secures the claim:	\$23,176.00	\$1,762.00	\$21,414.00			
Creditor's Name		2014 Volkswagen Jetta SE Sedan						
		115,000 miles (Needs New Engine)						
1420 S 500	w	As of the date you file, the claim is: Check all the	nat					
	ity, UT 84115	apply.  Contingent						
Number, Street, C	ty, State & Zip Code	☐ Unliquidated						
		Disputed						
Who owes the debt	? Check one.	Nature of lien. Check all that apply.						
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage car loan)	or secured					
■ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)					
☐ At least one of the	•	☐ Judgment lien from a lawsuit	•					
Check if this clair community debt		Other (including a right to offset)	ase Money Security					
Date debt was incurr	Opened 09/15 Last Active ed 3/26/19	Last 4 digits of account number 15	571					
Date dest was incul	JIZUIJ		<del>-</del>					
			<b>A10.101.01</b>	. □				
	=	Column A on this page. Write that number here: I the dollar value totals from all pages.	. ,	_				
Write that number			\$42,421.00	<u>)</u>				

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

# Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 21 of 81

Debtor 1	Marcy L Mira	mon		Case number (if known)
	First Name	Middle Name	Last Name	
Debtor 2	Todd A Miran	non		
	First Name	Middle Name	Last Name	
Co c/c PC	me, Number, Street, onn Appliances o Becket and L o Box 3002 alvern, PA 1935	ee LLP		On which line in Part 1 did you enter the creditor?
Pro BK PC	me, Number, Street, estige Financia ( Department ) Box 26707 It Lake City, U			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number

Fill in this info								
Fill in this info	rmation to identify your c	case:						
Debtor 1	Marcy L Miramon							
Dahtar 0	First Name	Middle I	Name	Last Name	)			
Debtor 2 (Spouse if, filing)	Todd A Miramon First Name	Middle I	Name	Last Name	)			
United States B	ankruptcy Court for the:	SOUTHER	N DISTRICT OF CA	LIFORNI	Ą			
Case number								
(if known)			_				☐ Check amend	if this is an ed filing
Be as complete a any executory co Schedule G: Exec Schedule D: Cred	E/F: Creditors W  nd accurate as possible. Using tracts or unexpired leases suttory Contracts and Unexpiretors Who Have Claims Secundinuation Page to this page on this page.	e Part 1 for cr that could res red Leases (C ured by Prope	editors with PRIORIT sult in a claim. Also li Official Form 106G). D erty. If more space is i	Y claims and st executo not incluned to continuity of the contraction	nd Part 2 for ry contract de any cre py the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, I	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on re listed in the boxes on the
name and case no		•			,		- F	, ,
	tors have priority unsecured							
□ No. Go to	• •	a commo agam	,					
Yes.								
2. List all of you identify what to possible, list to	ur priority unsecured claims type of claim it is. If a claim ha he claims in alphabetical orde e than one creditor holds a par	s both priority according to	and nonpriority amount the creditor's name. If	ts, list that o	laim here a	nd show both priority a	nd nonpriority amount	s. As much as
(For an expla	nation of each type of claim, s	ee the instruct	ions for this form in the	instruction	booklet.)	Total claim	Priority amount	Nonpriority amount
	Support Divisio		ast 4 digits of accou	nt number	1801	\$6,974.00	\$6,974.00	\$0.00
•	Creditor's Name  Broadway Ste 700	ν	Vhen was the debt inc	curred?	Opened Active	01/09 Last 9/26/16		
	iego, CA 92101						•	
	Street City State Zip Code ed the debt? Check one.	_	As of the date you file	, the claim	is: Check a	II that apply		
_		_	Contingent					
Debtor 1		L	☐ Unliquidated					
■ Debtor 2	only		☐ Disputed					
Debtor 1	and Debtor 2 only	1	ype of PRIORITY uns	secured cla	im:			
☐ At least of	one of the debtors and anothe	r	Domestic support of	oligations				
	this claim is for a commun subject to offset?	_	☐ Taxes and certain or ☐ Claims for death or ☐	•		•		
■ No			Other. Specify					

☐ Yes

**Family Support Arrears** 

Debtor 1 Marcy L Miramon Debtor 2 Todd A Miramon	Case no	umber (if known)		
Franchise Tax Board	Last 4 digits of account number	\$4,498.00	\$3,948.00	\$550.0
Priority Creditor's Name  Bankruptcy Section MS A340  PO Box 2952	When was the debt incurred?			
Sacramento, CA 95812-2952	As of the data was file the plain in Observal	l that and b		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check al	і тпат арріу		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
<u> </u>	☐ Disputed  Type of PRIORITY unsecured claim:			
■ Debtor 1 and Debtor 2 only	Domestic support obligations			
☐ At least one of the debtors and another	_			
■ Check if this claim is for a community debt	Taxes and certain other debts you owe the	•		
Is the claim subject to offset?	☐ Claims for death or personal injury while you	i were intoxicated		
■ No □ Yes	Other. Specify  State Taxes Owed			
2.3 Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number 7699	\$39,221.00	\$0.00	\$39,221.00
Centralized Insolvency Op PO Box 7346	When was the debt incurred? 2007, 20	11-2014		
Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim is: Check al	I that annly		
Who incurred the debt? Check one.	☐ Contingent	Tinat apply		
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
<u>_</u>	■ Taxes and certain other debts you owe the			
Check if this claim is for a community debt	☐ Claims for death or personal injury while you	•		
Is the claim subject to offset?	☐ Other. Specify	. Word intollicated		
☐ Yes	Income Taxes			
2.4 State of Colorado	Last 4 digits of account number	\$6,245.00	\$5,990.00	\$255.00
Priority Creditor's Name				Ψ200.00
Department of Revenu PO Box 17087 Denver, CO 80217-0087	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim is: Check al	I that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
■ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the	government		
Is the claim subject to offset?	☐ Claims for death or personal injury while you	were intoxicated		
■ No	Other. Specify			
Yes	State Taxes			
Part 2: List All of Your NONPRIORITY Unsect	urad Claims			
Part 2: List All of Your NONPRIORITY Unsection.  3. Do any creditors have nonpriority unsecured claim				
□ No. You have nothing to report in this part. Submit				
■ No. Too have nothing to report in this part. Submit	this form to the court with your other schedules.			

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Debtor 1 Marcy L Miramon Debtor 2 Todd A Miramon		Case number (if known)	
<ol> <li>List all of your nonpriority unsecured claims in unsecured claim, list the creditor separately for ear than one creditor holds a particular claim, list the o Part 2.</li> </ol>	ch claim. For each claim listed, identify what t	type of claim it is. Do not list claims already inc	cluded in Part 1. If more
Part 2.			Total claim
Ad Astra Recovery Serv	Last 4 digits of account number	3761	\$713.00
Nonpriority Creditor's Name 7330 W 33rd St N Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 02/14	-
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Collection	Attorney SPEEDY CASH 36	_
.2 Ad Astra Recovery Serv	Last 4 digits of account number	2966	\$111.00
Nonpriority Creditor's Name 7330 W 33rd St N Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 09/14	_
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney SPEEDY CASH 36	_
.3 Bc Services Inc	Last 4 digits of account number	9707	\$2,107.00
Nonpriority Creditor's Name 550 Disc Dr Longmont, CO 80503	When was the debt incurred?	Opened 04/15	_
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar dahta	
■ No			
□Yes	Other. Specify  ANTHONY	Attorney CENTURA-ST NORTH	_

Marcy L Miramon Todd A Miramon		Case number (if known)	
Bc Services Inc	Last 4 digits of account number	8324	\$135.00
Nonpriority Creditor's Name 550 Disc Dr Longmont, CO 80503	When was the debt incurred?	Opened 03/12	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify CARDIOVA	Attorney ESPN FRNT RNGE SCULAR	
CEP America California	Last 4 digits of account number	1511	\$656.00
Nonpriority Creditor's Name PO Box 582663 Modesto, CA 95358-0070	When was the debt incurred?	Opened 6/19/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	••	
Yes	Other. Specify Medical De	bts	
Convergent Outsourcing  Nonpriority Creditor's Name	Last 4 digits of account number	2440	\$979.00
800 Sw 39th St Renton, WA 98057	When was the debt incurred?	Opened 11/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Collection	Attorney T-MOBILE USA	

Debto Debto	or 1 Marcy L Miramon Todd A Miramon		Case number (if known)	
4.7	Costnwpkw1	Last 4 digits of account number	0191	\$1,806.00
	Nonpriority Creditor's Name PO Box 702118	When was the debt incurred?	2014-2015	
	San Antonio, TX 78270  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Toll Fines		
4.8	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	4313	\$607.00
	Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 09/15 Last Active 10/23/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	
4.9	E470 Public Higway Authority  Nonpriority Creditor's Name	Last 4 digits of account number		\$1,912.00
	22470 E 6th Pkwy #100 Aurora, CO 80018	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Misc Debt		

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Debt Debt	or 1 Marcy L Miramon or 2 Todd A Miramon		Case number (if known)	
4.1 0	ECMC	Last 4 digits of account number	4425	\$54,664.00
	Nonpriority Creditor's Name 111 Washington Ave South #1400 Minneapolis, MN 55401	When was the debt incurred?	1993, 2004	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Educationa	<u> </u>	
4.1 1	Express Toll	Last 4 digits of account number	2815	\$1,377.00
	Nonpriority Creditor's Name 22470 6th Parkway #110 Aurora, CO 80018	When was the debt incurred?	1/2014-15	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Toll Fees		
4.1	First Premier Bank	Last 4 digits of account number	8314	\$997.00
	Nonpriority Creditor's Name  3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 8/05/16 Last Active 10/21/16	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	
		· · ·		

	or 1 Marcy L Miramon Todd A Miramon		Case number (if known)	
4.1 3	First Premier Bank	Last 4 digits of account number	2896	\$751.00
J ]	Nonpriority Creditor's Name	_		
	3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 7/02/15 Last Active 10/21/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 4	First Premier Bank	Last 4 digits of account number	4289	\$661.00
	Nonpriority Creditor's Name  3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 8/18/16 Last Active 9/20/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l	
4.1 5	Guaranty Bank  Nonpriority Creditor's Name	Last 4 digits of account number	9851	\$1,078.00
	1650 Pace St Longmont, CO 80504	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify OverDraft A	Account	

Debto Debto	m 1 Marcy L Miramon Todd A Miramon		Case number (if known)	
4.1	I C System Inc	Last 4 digits of account number	7966	\$12,533.00
	Nonpriority Creditor's Name Po Box 64378	When was the debt incurred?	Opened 09/18	
	Saint Paul, MN 55164  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	•	
	Yes	Other. Specify Collection	Attorney PALOMAR HEALTH	
4.1	LVNV Funding LLC, assignee of	Last 4 digits of account number		\$838.00
	Nonpriority Creditor's Name FNBM LLC, Resurgent Capital Se PO Box 10587	When was the debt incurred?	2018	
	Greenville, SC 29603-0587  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt		
4.1 8	North American Recover  Nonpriority Creditor's Name	Last 4 digits of account number	2305	\$283.00
	1600 W 2200 S Ste 410 West Valley City, UT 84119	When was the debt incurred?	Opened 10/14	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	☐ Yes	Collection A  Other. Specify NORTH ME	Attorney APEX ER ST ANTHONY	

Debtor Debtor	1 Marcy L Miramon 2 Todd A Miramon		Case number (if known)	
4.1 9	NPRTO California, LLC	Last 4 digits of account number		\$1,135.00
	Nonpriority Creditor's Name 256 W Data Dr Draper, UT 84020	When was the debt incurred?	2018	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt		
4.2	One Main Financial  Nonpriority Creditor's Name	Last 4 digits of account number	4930	\$6,693.00
	Po Box 1010 Evansville, IN 47706	When was the debt incurred?	Opened 12/15 Last Active 11/25/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Surrendere	d Vehicle	
4.2	Onemain  Nonpriority Creditor's Name	Last 4 digits of account number	9315	\$5,775.00
	Po Box 1010 Evansville, IN 47706	When was the debt incurred?	Opened 12/30/15 Last Active 3/07/17	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other Specify Secured		

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Debtor Debtor	1 Marcy L Miramon 2 Todd A Miramon		Case number (if known)	
4.2	Palomar Health	Last 4 digits of account number	5806	\$7,859.00
	Nonpriority Creditor's Name Processing Center 2600 University Pkwy Coralville, IA 52241-3201	When was the debt incurred?	Opened 6/19/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical De	bts	
4.2	Portfolio Recovery Ass	Last 4 digits of account number	6521	\$610.00
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 08/14	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other Specify Factoring (BANK USA	Company Account CAPITAL ONE N.A.	
4.2	Premier Bankcard LLC	Last 4 digits of account number		\$2,412.00
	Nonpriority Creditor's Name Jefferson Capital Systems PO Box 7999	When was the debt incurred?	2018	
	Saint Cloud, MN 56302-9617  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	•		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	Student loans	. otaliii	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt		

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Debto Debto	r 1 Marcy L Miramon r 2 Todd A Miramon		Case number (if known)	
4.2 5	Professional Finance C	Last 4 digits of account number	4215	\$790.00
	Nonpriority Creditor's Name 5754 W 11th St Ste 100 Greeley, CO 80634	When was the debt incurred?	Opened 07/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify	Attorney KFIRESTONE FIRE PROTE	
4.2 6	Professional Finance C  Nonpriority Creditor's Name	Last 4 digits of account number	4214	\$104.00
	5754 W 11th St Ste 100 Greeley, CO 80634	When was the debt incurred?	Opened 02/12	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	<u>_</u>		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify  Collection A RADIOLOG	Attorney FLATIRONS Y	
4.2	Quantum3 Group LLC as agent fo	Last 4 digits of account number		\$481.00
	Nonpriority Creditor's Name Sadino Funding LLC PO Box 788	When was the debt incurred?	2018	
	Kirkland, WA 98083-0788  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt		

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Debtor Debtor	1 Marcy L Miramon 2 Todd A Miramon		Case number (if known)	
4.2 8	Quantum3 Group LLC as agent fo	Last 4 digits of account number		\$140.00
	Nonpriority Creditor's Name MOMA Funding LLC PO Box 788	When was the debt incurred?	2018	
	Kirkland, WA 98083-0788  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt		
4.2	Receivable Management	Last 4 digits of account number	1235	\$201.00
	Nonpriority Creditor's Name 240 Emery Street Bethlehem, PA 18015	When was the debt incurred?	Opened 02/16	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection INSURANC	Attorney PROGRESSIVE E	
4.3	San Diego Imaging Medical Grp	Last 4 digits of account number	5806	\$276.00
	Nonpriority Creditor's Name PO Box 23540 San Diego, CA 92193-3540	When was the debt incurred?	Opened 6/19/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical De	bts	

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Debto Debto	or 1 Marcy L Miramon Todd A Miramon		Case number (if known)	
4.3 1	Valley Path Med Assoc Inc	Last 4 digits of account number	5806	\$100.00
	Nonpriority Creditor's Name PO Box 744127 Dallas, TX 75374	When was the debt incurred?	Opened 7/2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other. Specify Medical De		
4.3				
2	Verizon  Nonpriority Creditor's Name	Last 4 digits of account number		\$616.00
	by American InfoSource LP PO Box 248838	When was the debt incurred?	2018	
	Oklahoma City, OK 73124-8838  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Misc Debt	_	
4.3	Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	5226	\$460.00
	6250 Ridgewood Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 11/15 Last Active 10/03/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plans, and other similar debts	
	■ No □ Yes			
	□ res	■ Other. Specify Charge Acc	Journ	

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	1 Marc		<i>l</i> iramon iramon			Case nu	umber (if know	vn)			
4.3	White H	lills (	Cash	Last 4 digits of account nu	mber	2908	}		\$631.00		
	dba Isla	and F	litor's Name Finance LLC	When was the debt incurre	d?	7/201	16				
PO Box 330 Hays, MT 59527  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only				As of the date you file, the	claim i	<b>s:</b> Check	k all that apply				
				П оt							
	☐ Debtor		•	☐ Contingent☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt				☐ Disputed							
				Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not							
											Is the claim subject to offset?
■ No □ Yes					Debts to pension or profit-sharing plans, and other similar debts						
	⊔ Yes			Other. Specify	■ Other. Specify Loan Advance						
Part 3:	List O	thers	s to Be Notified About a D	ebt That You Already Listed							
is tryir have n	ng to colle more than	ct fro	m you for a debt you owe to	l about your bankruptcy, for a debt someone else, list the original crec nat you listed in Parts 1 or 2, list th or submit this page.	ditor in	Parts 1	or 2, then list	t the collection agency	y here. Similarly, if you		
	nd Address		ant of Davanua	On which entry in Part 1 or Part 2 or	· _		ū				
	ado Dep Sherman		ent of Revenue Rm 504	Line 2.4 of (Check one):							
Denve	er, CO 80	261	-0004	Look 4 digits of account number	☐ Part 2: Creditors with Nonpriority Unsecured Claims						
				Last 4 digits of account number							
Name and Address ECMC PO Box 16408				On which entry in Part 1 or Part 2 of Line 4.10 of (Check one):	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims						
Saint Paul, MN 55116-0408			16-0408	Last 4 digits of account number	_	rail 2.	Creditors with	Nonphonity Onsecured	Cidillis		
								•			
				On which entry in Part 1 or Part 2 or Line <b>4.21</b> of ( <i>Check one</i> ):	On which entry in Part 1 or Part 2 did you list the original creditor?  Line <b>4.21</b> of ( <i>Check one</i> ):						
PO Box 3251			14		Part 2: Creditors with Nonpriority Unsecured Claims						
Evansville, IN 47731			31	Last 4 digits of account number							
Name ar	nd Address			On which entry in Part 1 or Part 2 or	did vou	list the o	original credito	r?			
Palomar Health				Line 4.22 of (Check one):	· -		•	Priority Unsecured Clai	ms		
PO Box 748696 Los Angeles, CA 90074-8696			0074-8696			Part 2:	Creditors with	Nonpriority Unsecured	Claims		
Los Aligeles, OA 30074-0030			3014 0000	Last 4 digits of account number		58	806				
				On which entry in Part 1 or Part 2 of Line <b>2.1</b> of ( <i>Check one</i> ):	On which entry in Part 1 or Part 2 did you list the original creditor?  ine 2.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims						
PO Box 122031			12-2031	☐ Part 2: Creditors with Nonpriority Unsecured Claims				Claims			
San Diego, CA 92112-2031			12-2031	Last 4 digits of account number							
5 / /	<b>-</b> • • • • •										
		ts of		Jnsecured Claim laims. This information is for statis	stical re	porting	purposes on	nly. 28 U.S.C. §159. Ad	d the amounts for each		
		6-	Domostio support abliquet	no.		60		Total Claim			
Total		6a.	Domestic support obligations			6a.	\$	6,974.00	-		
claims from Pa	rt 1	6b.	Taxes and certain other del	ots you owe the government		6b.	\$	49,964.00			
		6c.		al injury while you were intoxicated	t	6c.	\$	0.00	-		
		6d.	Other. Add all other priority u	nsecured claims. Write that amount h	nere.	6d.	\$		_		

	arcy L Nodd A M	diramon iramon	Case number (if known)			
					0.00	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	56,938.00	
					Total Claim	
	6f.	Student loans	6f.	\$	0.00	
Total claims						
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00	
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	110,491.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	110,491.00	

Fill in this inform	ation to identify your	case:			
Debtor 1	Marcy L Miramon				
	First Name	Middle Name	Last Name		
Debtor 2	<b>Todd A Miramon</b>				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF CALIFORNIA		
Case number					Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	)				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

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Fill in this	information to identify your	case:		
Debtor 1	Marcy L Miramon	l		
<b>D</b> 1 / 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ing) Todd A Miramon First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT OF	- CALIFORNIA	
Case num (if known)	ber			☐ Check if this is an
				amended filing
Officia	l Form 106H			
	lule H: Your Cod	ohtors		12/15
Scried	dule II. Tour Cou	epioi 3		12/13
people are fill it out, a your name	e filing together, both are equ	ally responsible for supplyi boxes on the left. Attach th . Answer every question.	ng correct informat ne Additional Page t	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
1. 50	you have any obdebtors. (ii	you are ming a joint oase, as	not not ounce opouce	as a societion.
■ No				
☐ Yes	S			
	hin the last 8 years, have youna, California, Idaho, Louisiana			y? (Community property states and territories include ington, and Wisconsin.)
□ No.	. Go to line 3.			
■ Yes	s. Did your spouse, former spo	use, or legal equivalent live w	ith you at the time?	
	□ No			
	■ Yes.			
	_ 100.			
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	Name of your spouse, former sp	ouso or logal oquivalent		
	Number, Street, City, State & Zip			
in line Form	e 2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make:	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street	Ctoto	ZID Codo	_
	City	State	ZIP Code	
3.2				C Schodule D. line
	Name			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

Fill in this informati	on to identify your case:	
Debtor 1	Marcy L Miramon	_
Debtor 2 (Spouse, if filing)	Todd A Miramon	_
United States Banl	kruptcy Court for the: SOUTHERN DISTRICT OF CALIFORNIA	_
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
Official For	m 106l	13 income as of the following date:  MM / DD/ YYYY

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

mployed ot employed	<ul><li>■ Employed</li><li>□ Not employed</li></ul>
. ,	☐ Not employed
sion Administrator	
sion Administrator	<b>Executive Associate</b>
•	Capstone Tax Consulting
	5180 Ward Rd #206 Wheat Ridge, CO 80033
8	Diego Pension sultants  8 Copley Dr Diego, CA 92111  3 yrs

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,000.67 3,590.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 5,000.67 3,590.00

Official Form 106l Schedule I: Your Income page 1

Debtor 2			Case n	umber ( <i>if known</i> )				
				Debtor 1	-	ng spouse		
C	opy line 4 here	4.	\$	5,000.67	\$	3,590.00	-	
5. <b>Li</b>	ist all payroll deductions:							
58	a. Tax, Medicare, and Social Security deductions	5a.	\$	613.17	\$	455.00		
5k	b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	-	
50		5c.	\$	0.00	\$	0.00	-	
50		5d.	\$	0.00	\$	0.00		
56	e. Insurance	5e.	\$	91.00	\$	0.00	-	
5f	f. Domestic support obligations	5f.	\$	0.00	\$	297.00	-	
50	g. Union dues	5g.	\$	0.00	\$	0.00		
5ł	h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00		
6. <b>A</b>	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	704.17	\$	752.00	-	
7. <b>C</b>	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,296.50	\$	2,838.00		
	ist all other income regularly received:  a. Net income from rental property and from operating a busines profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
8k	b. Interest and dividends	8b.	\$	0.00	\$	0.00	-	
80	c. Family support payments that you, a non-filing spouse, or a de regularly receive Include alimony, spousal support, child support, maintenance, divo settlement, and property settlement.	•	\$	0.00	\$	0.00	-	
80	d. Unemployment compensation	8d.	\$	0.00	\$	0.00		
86	e. Social Security	8e.	\$	0.00	\$	0.00		
8f 8g	<ul> <li>f. Other government assistance that you regularly receive         Include cash assistance and the value (if known) of any non-cash a         that you receive, such as food stamps (benefits under the Supplem         Nutrition Assistance Program) or housing subsidies.         Specify:        </li></ul>		\$	0.00	\$ \$	0.00	-	
	h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	•	
9. <b>A</b>	.dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	)	
10 <b>C</b> :	calculate monthly income. Add line 7 + line 9.	10. \$	1	,296.50 + \$	2 838 (	00 = \$	7,134.50	
	· · · · · · · · · · · · · · · · · · ·			,230.30	2,000.	<del></del>	7,104.00	
In ot De	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.0							
W	dd the amount in the last column of line 10 to the amount in line 11 Vrite that amount on the Summary of Schedules and Statistical Summary pplies				a, if it	2. \$	7,134.50	
13. <b>D</b>	o you expect an increase or decrease within the year after you file No.	this form?				Combir monthly	ned y income	
_	Yes. Explain: Jont Debtor anticipated lower income in	next 6 months	S.					

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	our case:							
Deb	tor 1	Marcy L Mira	amon			Che	eck if this is:			
							☐ An amended filing			
	otor 2 ouse, if filing)	Todd A Mira	mon					owing postpetition chapter for the following date:		
			COLUTI	IEDNI DIOTDIOT OF OAL	IEODAIIA		- MM / DD / MANA/			
Unit	ed States Bankr	ruptcy Court for the	: SOUTE	IERN DISTRICT OF CAL	IFORNIA		MM / DD / YYYY			
	e number nown)									
O	fficial Fo	rm 106J								
S	chedule	J: Your I	Exper	ises				12/1		
info	ormation. If m		eded, atta	. If two married people a ch another sheet to this n.						
Par	t 1: Descr	ribe Your House	hold							
1.	Is this a joir									
	□ No. Go to									
		es Debtor 2 live i	in a separ	ate household?						
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	btor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state dependents				Daughter		16	□ No ■ Yes		
					Son		17	□ No		
					3011			_ Yes □ No		
								Yes		
								□ No		
3.	Do vour ext	oenses include	_					_		
0.	expenses o	f people other tl d your depende	han $_{oldsymbol{\sqcap}}$	No Yes						
Par		ate Your Ongoi								
exp								napter 13 case to report of the form and fill in the		
				government assistance						
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I:	Your Income		Your ex	penses		
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$	2,520.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$	0.00		
		rty, homeowner's	s, or renter	's insurance		4a. 4b.	·	38.00		
	•	•		ıpkeep expenses		4c.	· -	0.00		
_		owner's associat				4d.	·	0.00		
5.	Additional r	mortgage payme	ents for yo	<b>our residence,</b> such as h	ome equity loans	5.	\$	0.00		

	otor 1	Marcy L Miramon			
Deb	otor 2	Todd A Miramon	Case num	ber (if known)	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	300.00
	6b.	Water, sewer, garbage collection	6b.	·	250.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	•	575.00
	6d.	Other. Specify:	6d.	· -	0.00
7.		and housekeeping supplies	7.	·	1,000.00
8.		dcare and children's education costs	8.	\$	150.00
9.		ning, laundry, and dry cleaning	9.	· -	150.00
10.		onal care products and services	10.	·	150.00
11.		cal and dental expenses	11.	\$	220.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	680.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
14.	Char	itable contributions and religious donations	14.	\$	80.00
15.	Insu				
		ot include insurance deducted from your pay or included in lines 4 or 20.		_	
		Life insurance	15a.	· ·	0.00
		Health insurance	15b.	· ·	0.00
		Vehicle insurance	15c.		114.00
40		Other insurance. Specify:	15d.	\$	0.00
	Spec	·	16.	\$	0.00
17.		illment or lease payments:	47-	¢.	000.00
		Car payments for Vehicle 1	17a.	·	300.00
		Car payments for Vehicle 2	17b.	*	423.00
		Other Specify: Student Loan Installment Payment	17c. 17d.		5.00
40		Other. Specify: payments of alimony, maintenance, and support that you did not report as		Φ	0.00
10.		icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.		r payments you make to support others who do not live with you.		\$	400.00
	Spec	ify: Misc support expenses child residing elsewhere.	19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.	· -	0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.	· <u> </u>	0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
		Homeowner's association or condominium dues	20e.	·	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22.		ulate your monthly expenses			
		Add lines 4 through 21.		\$	7,505.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	7,505.00
23.		ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	7,134.50
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,505.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-370.50
		The result is your monthly her income.	200.		

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: 1. Joint Debtor has 50% economic responsibility for costs of child living elsewhere. 50% of school, medical, etc. costs.

2. Joint Debtor will have health insurace costs of approximatley \$400 monthly deducated from his pay check next enrollment period.

Fill in this inform	nation to identify your	case:		
Debtor 1	Marcy L Miramon			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Todd A Miramon First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRIC	T OF CALIFORNIA	
Case number(if known)				☐ Check if this is an amended filing
Official Form  Declarati		ın Individua	l Debtor's Sched	u <b>les</b> 12/15
f two married pe	ople are filing togethe	, both are equally resp	onsible for supplying correct infor	mation.
obtaining money		n connection with a bar		a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
Sign	Below			
Did you pay	or agree to pay some	one who is NOT an atto	rney to help you fill out bankrupto	cy forms?
■ No				
☐ Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sur	nmary and schedules filed with th	is declaration and
X /s/ Marc	cy L Miramon		X /s/ Todd A Miramo	n
	<b>Miramon</b> e of Debtor 1		Todd A Miramon Signature of Debtor 2	

Date August 31, 2019

Date August 31, 2019

Fill	l in this inforr	nation to identify you	r case:			
De	btor 1	Marcy L Miramo	Middle Name	Last Name		
De	btor 2	Todd A Miramon		Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA		
റം	se number					
	nown)				_	Check if this is an amended filing
						ag
	fficial Fo	-				
				duals Filing for E		4/19
					equally responsible for sup y additional pages, write yo	
		n). Answer every ques		o una form. On the top of an	y additional pages, write yo	ui name and case
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where Yo	u Lived Before		
1.	-	r current marital statu				
٠.	Wilat is you	i current mantai statu	is :			
	■ Married					
	☐ Not mai	rried				
2.	During the la	ast 3 years, have you	lived anywhere other thar	where you live now?		
	□ No					
	Yes. Lis	st all of the places you li	ived in the last 3 years. Do i	not include where you live nov	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	10548 Asp	oen St t, CO 80504	From-To: <b>11/10-9/16</b>	■ Same as Debtor	1	Same as Debtor 1
		., 00 0000-				From-To:
3.					nity property state or territor tico, Texas, Washington and \	
olui	_	oo molado / mzona, oa	mornia, radiro, Eduloidira, re	ovada, rvov moxico, r dono r	noo, roxao, rraonington and t	, 110001101111, j
	∐ No ■ Yes Ma		a a dada 11 Marin Oa dabta wa 11	D(f = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =		
	■ Yes. Ma	ake sure you fill out Scr	nedule H: Your Codebtors (C	Official Form 106H).		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.					ear or the two previous cale	endar years?
				all businesses, including part ve together, list it only once u		
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
				exclusions)		and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$39,300.00	■ Wages, commissions, bonuses, tips	\$29,100.00
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107			ffairs for Individuals Filing for E	,	page '

page 1

Debtor 1 Debtor 2	Marcy L Mir Todd A Mira			Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	
For last calendar year: (January 1 to December 31, 2018)		31, 2018 )	■ Wages, commissions, bonuses, tips	\$59,100.00	■ Wages, commiss bonuses, tips	ions, \$42,300.00
			☐ Operating a business		☐ Operating a busing	ness
	alendar year be 1 to December		■ Wages, commissions, bonuses, tips	\$52,700.00	■ Wages, commiss bonuses, tips	ions, \$47,400.00
			☐ Operating a business		☐ Operating a busing	ness
•	No Yes. Fill in the d	J	me from each source separat  Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	
			Sources of income		Sources of income	
			Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
Part 3:	List Certain P	ayments You	Made Before You Filed for I	Bankruptcy		
_	No. <b>Neither D</b> individual	pebtor 1 nor D primarily for a e 90 days befo Go to line 7. List below e	personal, family, or househol re you filed for bankruptcy, did ach creditor to whom you pai	mer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,825* or more i	I of \$6,825* or more? n one or more paymen	
	* Subject	not include	editor. Do not include paymen payments to an attorney for the on 4/01/22 and every 3 years	nis bankruptcy case.		
			r both have primarily consure you filed for bankruptcy, die		of \$600 or more?	
	■ No.	Go to line 7.				
	□ <sub>Yes</sub>	include payı	ach creditor to whom you pai ments for domestic support ol this bankruptcy case.			paid that creditor. Do not do not include payments to an
Cred	ditor's Name ar	d Address	Dates of payme	nt Total amount paid	Amount you Wa	as this payment for

		odd A Miramon		Cas	se number (if known)		
	Insiders in	year before you filed for bankrup nolude your relatives; any general p you are an officer, director, person in s you operate as a sole proprietor.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you g securities; and ar	u are a gener ny managing a	al partner; corporations agent, including one for
	■ No □ Yes.	List all payments to an insider.					
	Insider's	Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	insider?	year before you filed for bankrup		ments or transfer a	any property on a	ecount of a d	lebt that benefited an
	■ No □ Yes.	List all payments to an insider					
	Insider's	Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
Par	t 4: Ide	ntify Legal Actions, Repossessio	ns, and Foreclosures	•			
	List all su	year before you filed for bankrup ch matters, including personal injury ons, and contract disputes.					
	■ No □ Yes.	Fill in the details.					
	Case titl		Nature of the case	Court or agency		Status of the	he case
		year before you filed for bankrup that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
	_	Go to line 11. Fill in the information below.					
	Creditor	Name and Address	Describe the Property		Date		Value of the property
	accounts No	days before you filed for bankru or refuse to make a payment bed			nancial institution	, set off any	amounts from your
		Name and Address	Describe the action the	creditor took		action was	Amount
		year before you filed for bankrup pointed receiver, a custodian, or a		erty in the possess	taken		efit of creditors, a
Par	t 5: Lis	t Certain Gifts and Contributions					
13.	■ No	years before you filed for bankru	ptcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?
	Gifts wit	h a total value of more than \$600 on	Describe the gifts		Dates the gi	you gave fts	Value
	Person t Address	to Whom You Gave the Gift and ::					

DCI	Todd A Willamon			asc number (		
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co		, , , ,	s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did yo	ou lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	how the loss occurred	Include	be any insurance coverage for the loe the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: H	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pulling any attorneys, bankruptcy petition pr	repariı	ng a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
	Lifeline Legal, LLP 9665 Chesapeake Dr #345 San Diego, CA 92123 brian@lifelinelegal.com		Attorney Fees		8/19	\$865.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that your No	itors o	r to make payments to your creditors		r transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre	busin made a	less or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made
	Person's relationship to you					

	otor 1 otor 2	Marcy L Miramon Todd A Miramon				Case nu	mber (if known)		
19.	benef	n 10 years before you filed for bankrupiciciary? (These are often called asset-prosono			y property to	a self-settl	ed trust or similar device	of w	vhich you are a
	Nam	e of trust		Description and v	alue of the pr	operty trar	nsferred		ate Transfer was nade
Par	t 8:	List of Certain Financial Accounts, In	strur	nents, Safe Deposi	t Boxes, and S	Storage Un	its		
20.	sold, Include house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes. Fill in the details.	or otl	ner financial accou	nts; certificate	s of depos			
		e of Financial Institution and Pess (Number, Street, City, State and ZIP		st 4 digits of count number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	-	Last balance before closing o transfe
21.	cash,	ou now have, or did you have within 1 or other valuables? No Yes. Fill in the details.			eposit box or other depos	itor	y for securities,		
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had an Address (Number State and ZIP Code)				e the contents		Do you still have it?
22.	<b>I</b>	you stored property in a storage unit No Yes. Fill in the details.	or pla	ace other than your	home within	1 year befo	ore you filed for bankrupto	;y?	
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)		Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	e the contents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control	for S	Someone Else					
23.		ou hold or control any property that so omeone.	meo	ne else owns? Incl	ude any prope	rty you bo	rrowed from, are storing f	or,	or hold in trust
		No Yes. Fill in the details.							
	0	aula Nama		\A/l- = = := th = ====	1	Dagarila	- 41		Value

Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Describe the property

Value

#### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Deb	otor 2 Todd A Miramon		Case number (if known)		
24.	Has any governmental unit notified you tha  ■ No □ Yes. Fill in the details.	t you may be liable or potentially liable	under or in violation of an environm	ental law?	
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of  ■ No □ Yes. Fill in the details.	any release of hazardous material?			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adr  ■ No □ Yes. Fill in the details.	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.	
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	t 11: Give Details About Your Business or	Connections to Any Business			
27.	_	in a trade, profession, or other activity, pany (LLC) or limited liability partnershi	either full-time or part-time	y business?	
	No. None of the above applies. Go to l	Part 12.			
	,	I in the details below for each business			
Business Name Address (Number, Street, City, State and ZIP Code)  Describe the nature of the business Do not include Social Security num Name of accountant or bookkeeper Dates business existed					
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Incl	ude all financial	
	Yes. Fill in the details below.				
	Name Address (Number Street City State and ZIP Code)	Date Issued			

Debtor 1 Marcy L Miramon

Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 50 of 81

Debtor 1	Marcy L Miram	on	
Debtor 2	Todd A Miramo	on	Case number (if known)
Part 12:	Sign Below		
		his Otatamant of Fluoristal Affalia	
			nd any attachments, and I declare under penalty of perjury that the answers t, concealing property, or obtaining money or property by fraud in connection
			prisonment for up to 20 years, or both.
	§§ 152, 1341, 1519		,
/s/ Marc	y L Miramon	/s/ To	odd A Miramon
	. Miramon		A Miramon
•	e of Debtor 1	Signa	ture of Debtor 2
Date A	ugust 31, 2019	Date	August 31, 2019
Did you a	ttach additional pa	ges to Your Statement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay	someone who is not an attorney to	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	ame of Person	. Attach the Bankruptcy Petition Pre	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:			
Debtor 1	Marcy L Miramon				
	First Name	Middle Name	Last Name		
Debtor 2	Todd A Miramon				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA		
Case number					
(if known)					k if this is an ided filing
	orm 100				· ·
		n for Individu	uals Filing Under	Chapter 7	12/1
Stateme	nt of Intentio	on for Individu		Chapter 7	12/15
f you are an ind	nt of Intentio	pter 7, you must fill out		Chapter 7	12/15

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who	Have	Secured	Claims
---------	-----------	-----------	-----	------	---------	--------

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's American Credit Accept name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:  2007 Toyota 4Runner SR5 188,000 miles	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
Creditor's Conns Credit Corp name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of Misc furniture	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	■ Retain the property and [explain]:  Continue making payments pursuant to underlying or modified contract	
Creditor's Prestige Financial Svc name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2014 Volkswagen Jetta SE Sedan 115,000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	Marcy L Miramon Todd A Miramon	Case number (if known)	
propert securin		☐ Retain the property and [explain]:	-
For any ui	rmation below. Do not list real estate leases. Un	I in Schedule G: Executory Contracts and Unexpired nexpired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
	name: n of leased		□ No
Property:			☐ Yes
	name: n of leased		□ No
Property:			☐ Yes
Lessor's r Description	name: n of leased		□ No
Property:			☐ Yes
Lessor's r	name: n of leased		□ No
Property:			☐ Yes
Lessor's r	name: n of leased		□ No
Property:			☐ Yes
Lessor's r	name: n of leased		□ No
Property:			☐ Yes
Lessor's r	name: n of leased		□ No
Property:	To reason		☐ Yes
Part 3:	Sign Below		
Under per property t	nalty of perjury, I declare that I have indicated m hat is subject to an unexpired lease.	y intention about any property of my estate that sec	ures a debt and any personal
χ /s/ N	larcy L Miramon	X /s/ Todd A Miramon	
Mar	cy L Miramon ature of Debtor 1	Todd A Miramon Signature of Debtor 2	
Date	August 31, 2019	Date August 31, 2019	

Fill in this info	ormation to identify your case:			O.L.				in this famous and	in Famo
	· · ·				eck one A-1Su		irected	in this form and	in Form
Debtor 1	Marcy L Miramon								
Debtor 2 (Spouse, if filing)	Todd A Miramon				☐ 1. Th	nere is no pres	umptio	n of abuse	
	s Bankruptcy Court for the: Southern District c	of Califor	oio		2. Th	ne calculation t	o deter	mine if a presun	nption of abuse
Officed States	s Bankruptcy Court for the. Southern District C	ıı Callion	Па			pplies will be n Calculation (Off		nder <i>Chapter 7 I</i>	∕leans Test
Case numbe	r					,		,	
(II KIIOWII)								ot apply now be e but it could ap	
						eck if this is a		·	
Official	Form 122A - 1			'	_ 0			naoa ming	
	r 7 Statement of Your Cur	ront	Mar	othly Inc	oma	<b>.</b>			40/4/
Chapte	1 / Statement of Tour Cur	Tent	IVIOI	itiliy ilic	OIIIE	<del></del>			12/1
Part 1:  1. What is  Not  Marr  Marr  Li  pi	ate sheet to this form. Include the line number to wiff known). If you believe that you are exempted froitary service, complete and file Statement of Exempt Calculate Your Current Monthly Income seyour marital and filing status? Check one or married. Fill out Column A, lines 2-11.  Tried and your spouse is filing with you. Fill out ried and your spouse is NOT filing with you. Tried and your spouse is NOT filing with you. Tried and your spouse is NOT filing with you. Tried and your spouse is not legally separated. Fill of enalty of perjury that you and your spouse are leving apart for reasons that do not include evadir overage monthly income that you received from all for example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example, if you are filing on September 15, the 6-merceived from example in the filing of the filing on September 15, the 6-merceived from example in the filing of t	m a presuntion from  hely.  The second of th	olumns your s rated. mn A, li parateceans Te derived	of abuse because mption of Abuse is A and B, lines is a pouse are: Fill out both Column and a pour a p	2-11.  umns At fill out kruptcys. 11 U.  monthigh August	A and B, lines 2 Column B. By law that applic S.C § 707(b)(7)  before you file ust 31. If the amount of the column b.	2-11.  checkes or th  (B).  e this ba	ing this box, you at you and your monthly incom	declare under spouse are  1 U.S.C. § e varied during
	ns, add the income for all 6 months and divide the total on the same rental property, put the income from that p								
					Colum Debto		Debt	mn B or 2 or filing spouse	
	ross wages, salary, tips, bonuses, overtime,	and com	nmissio	ons (before all	\$	5,333.33	Φ.	3,498.33	
. ,	deductions).  y and maintenance payments. Do not include	noumon	to from	o opougo if	Φ	3,333.33	\$	3,490.33	
	B is filled in.	paymem	is mom	a spouse ii	\$	0.00	\$	0.00	
of you of from an and roo	ounts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household mmates. Include regular contributions from a sp Do not include payments you listed on line 3.	. Include d, your de	regular epende	r contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inc	ome from operating a business, profession,	or farm							
		Φ.		otor 1					
	eceipts (before all deductions)	\$ -\$	0.00						
	y and necessary operating expenses	· —		Copy here ->	¢	0.00	\$	0.00	
	nthly income from a business, profession, or far	пֆ	0.00	John Heie ->	Ψ	0.00	Ψ	0.00	
6. Net inc	ome from rental and other real property		Deb	otor 1					
Gross re	eceipts (before all deductions)	\$	0.00						
	y and necessary operating expenses	<b>-</b> \$	0.00						
	nthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

0.00

Debtor 1 Debtor 2		cy L Miramon d A Miramon				Case numbe	er ( <i>if known</i> )			
						Column A Debtor 1		Column E Debtor 2 non-filing	or	
8. <b>U</b> n	nemplo	yment compensation				\$	0.00	\$	0.00	
		ter the amount if you contend that the amou Security Act. Instead, list it here:	ınt received was a be	enefi	t unde	r				
	For you	I	.\$	0.0	00					
		ır spouse		0.0	00					
9. <b>Pe</b>	ension o	or retirement income. Do not include any a der the Social Security Act.		was	s a	\$	0.00	\$	0.00	
Do red do	not inc	rom all other sources not listed above. Solude any benefits received under the Social as a victim of a war crime, a crime against haterrorism. If necessary, list other sources or w.	Security Act or payn umanity, or internatio	nent onal	s or					
						\$	0.00	\$	0.00	
	_					\$	0.00	\$	0.00	
	Т	otal amounts from separate pages, if any.			+	\$	0.00	\$	0.00	
		your total current monthly income. Add mn. Then add the total for Column A to the		r	\$	5,333.33	+ \$ _	3,498.33	= \$_	8,831.66
Part 2:	De	termine Whether the Means Test Applies	s to You						Total incom	current monthly e
12. <b>Ca</b>	alculate	your current monthly income for the year	ar. Follow these steps	s:						
12	a. Copy	your total current monthly income from line	e 11			Сор	y line 11	here=>	\$	8,831.66
	Multi	ply by 12 (the number of months in a year)							X	
12	b. The	result is your annual income for this part of	the form					12	2b. \$1	05,979.92
13. <b>Ca</b>	alculate	the median family income that applies t	o you. Follow these s	step	s:					
Fill	I in the	state in which you live.	CA							
Fill	I in the	number of people in your household.	4							
То	find a l	median family income for your state and siz ist of applicable median income amounts, g m. This list may also be available at the bar	o online using the lin		ecified	I in the separ	ate instru	. 13 ctions	3. \$	96,813.00
14. <b>Ho</b>	ow do t	he lines compare?								
14	ła. □	Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1	, che	eck bo	x 1, <i>There i</i> s	no presur	mption of abo	use.	
14	ŀb. ■	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	o of page 1, check bo	x 2,	The p	resumption o	f abuse is	determined	by Form 1.	22A-2.
Part 3:	Sig	gn Below								
	_	gning here, I declare under penalty of perju	ry that the information	n on	this st	tatement and	l in any att	achments is	true and c	orrect.
	X /s	/ Marcy L Miramon	X	<b>(</b> /s	s/ Tod	ld A Miram	on			
		arcy L Miramon gnature of Debtor 1				A Miramon re of Debtor :	2			
D		ugust 31, 2019 M / DD / YYYY	Date			t 31, 2019				
		u checked line 14a, do NOT fill out or file Fo	orm 122A-2.			-				
	If you	u checked line 14b, fill out Form 122A-2 and	d file it with this form.							

Fill in this information to identify your case:						
Debtor 1	Marcy L Miramon					
Debtor 2 (Spouse, if filing	Todd A Miramon					
United States Bankruptcy Court for the: Southern District of California						
Case number(if known)						

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
2. There is a presumption of abuse.

☐ Check if this is an amended filing

# Official Form 122A - 2

# **Chapter 7 Means Test Calculation**

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t1: Determine Your Adjusted Income					
1.	Copy your total current monthly income. Copy	line 11 from Official F	orm 122 <i>A</i>	-1 here=>	\$	8,831.66
2.	Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.  ☐ Yes. Is your spouse Filing with you?  ☐ No. Go to line 3.  ☐ Yes. Fill in \$0 for the total on line 3.					
3.	Adjust your current monthly income by subtracting any part of household expenses of you or your dependents. Follow these so On line 11, Column B of Form 122A–1, was any amount of the incomexpenses of you or your dependents?  No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:	teps:			ed for the	household
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax del support other than you or your dependents.	are subt	e amount tracting fr ouse's ind	om		
	Total.	\$ \$	0.00	Convental have		0.00
4.	Adjust your current monthly income. Subtract line 3 from line 1.			Copy total here	=> <b>-</b> \$	8,831.66

Official Form 122A-2

	Marcy L Miramon Todd A Miramon	Case number (if known)						
art 2	Calculate Your Deductions from Your Income							
to a	e Internal Revenue Service (IRS) issues National and I answer the questions in lines 6-15. To find the IRS sta tructions for this form. This information may also be a	ndards, go online	using the link specified in					
you	duct the expense amounts set out in lines 6-15 regardless or actual expenses if they are higher than the standards. Dome in line 3 and do not deduct any operating expenses t	o not deduct any a	mounts that you subtracted	fro your spouse's				
If yo	our expenses differ from month to month, enter the average	ge expense.						
Wh	enever this part of the from refers to you, it means both you	ou and your spouse	e if Column B of Form 122A-	1 is filled in.				
5.	The number of people used in determining your dec	ductions from inco	ome					
	Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.							
Nat	tional Standards You must use the IRS National	al Standards to ans	wer the questions in lines 6-	7.				
6.	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, an		d in line 5 and the IRS Natio	nal \$	1,786.00			
7.	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or older-because older people have higher than this IRS amount, you may deduct the additi-	mber of people is sp a higher IRS allow	olit into two categoriespeop ance for health care costs. I	ole who are under 65 and	b			
	might than the amount, you may deduct the addition	onai amount on line	: 22.		al <del>C</del>			
Ped	ople who are under 65 years of age	onal amount on line	. ZZ.		ai e			
Ped	· ,	\$\$ 55.00			31 <del>C</del>			
Ped	ople who are under 65 years of age	I			are			
Ped	7a. Out-of-pocket health care allowance per person	\$ 55.00		S220.00	116			
	7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65	\$ 55.00 × 4		S220.00	116			
	7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.	\$ 55.00 × 4	Copy here=>	S <u>220.00</u>	31 <del>C</del>			
	7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.  ople who are 65 years of age or older	\$ 55.00	Copy here=>	S <u>220.00</u>	11 E			
	7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.  Ople who are 65 years of age or older  7d. Out-of-pocket health care allowance per person	\$ 55.00 × 4 \$ 220.00 \$ 114.00	Copy here=>		116			

Debtor 1

Debtor 1 Debtor 2		-	Miramon Iiramon	1							Case numbe	er ( <i>if known</i> )				
Loca	al Sta	ndards	You mus	st use tl	he IRS L	ocal Sta	ndards to ar	nswer the	question	s in lir	nes 8-15.					
			ation from oses into			.S. Trus	tee Prograr	n has div	ided the	IRS I	Local Stand	dard for h	ousinç	g for		
■н	ousi	ng and ເ	ıtilities - lı	nsuran	ce and o	perating	g expenses	<b>;</b>								
■ н	ousi	ng and ι	ıtilities - N	Mortgag	ge or ren	nt expen	ses									
Тоа	nswe	er the qu	estions in	n lines	8-9, use	the U.S.	. Trustee P	rogram c	hart.							
							the separat erk's office.	e instructi	ions for t	nis for	m.					
							ing expense surance and							, fill \$		691.00
9.	Hou	sing and	l utilities -	- Mortg	age or re	ent expe	enses:									
					,		n line 5, fill in expenses					\$	2,4	79.00		
	9b. Total average monthly payment for all mortgages and other debts secured by your home.															
To calculate the total average monthly payment, add all an contractually due to each secured creditor in the 60 month for bankruptcy. Then divide by 60.						<b>;</b>										
		Name of	f the credit	tor				Averaç payme	ge month ent	ly						
		-NONE	-					\$								
				Total	average	monthly	payment	\$		0.00	Copy here=>	-\$		0.00	Repeat this amount on line 33a.	
	9c.	Net mor	tgage or re	ent expe	ense.											
							<i>yment</i> ) from n \$0, enter \$				\$	2,479	0.00	Copy here=>	\$	2,479.00
							division of nses, fill in						rrect a	ınd	\$	0.00
	Exp	lain why	:													
11.	Loca	al transp	ortation e	expens	es: Chec	k the nu	mber of veh	icles for w	which you	claim	n an owners	ship or ope	rating	expense.		
	<b>□</b> 0.	. Go to lir	ne 14.													
	□ 1.	. Go to lir	ne 12.													
	<b>2</b>	or more.	Go to line	e 12.												
							cal Standard								\$	510.00

Debtor 1 Debtor 2  Marcy L Miramon Todd A Miramon		Case number (if	known)		
<ol> <li>Vehicle ownership or lease expense: Using the I You may not claim the expense if you do not make more than two vehicles.</li> </ol>					
Vehicle 1 Describe Vehicle 1: 2007 Toyota 4R	Runner SR5 188,000 miles				
13a. Ownership or leasing costs using IRS Local Standa	rd	\$	508.00		
13b. Average monthly payment for all debts secured by Do not include costs for leased vehicles.	Vehicle 1.				
To calculate the average monthly payment here and are contractually due to each secured creditor in the bankruptcy. Then divide by 60.		nat			
Name of each creditor for Vehicle 1	Average monthly payment				
American Credit Accept	\$\$				
Total Average Monthly Pa	syment \$ 297.22	Copy here => -\$	297	Repeat this amount on line 33b.	
13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is les	s than \$0, enter \$0.	\$	210.78	Copy net Vehicle 1 expense here => \$	210.78
Vehicle 2 Describe Vehicle 2: 2014 Volkswag Engine)	en Jetta SE Sedan 115,000	miles (Need	s New		
13d. Ownership or leasing costs using IRS Local Standa	rd	\$	508.00		
13e. Average monthly payment for all debts secured by leased vehicles.	Vehicle 2. Do not include costs f	or			
Name of each creditor for Vehicle 2	Average monthly payment				
Prestige Financial Svc	\$ 458.91	-			
Total Average Monthly Pa	syment \$ 458.91	Copy here => -\$	458.9	Repeat this amount on line 33c.	
13f. Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is les	s than \$0, enter \$0	\$	49.09	Copy net Vehicle 2 expense here => \$	49.09
<ol> <li>Public transportation expense: If you claimed 0 v Transportation expense allowance regardless of wh</li> </ol>			ds, fill in the	Public \$	0.00
<ol> <li>Additional public transportation expense: If you also deduct a public transportation expense, you m not claim more than the IRS Local Standard for Pub.</li> </ol>	ay fill in what you believe is the				0.00

Debtor 1
Debtor 2

Marcy L Miramon
Todd A Miramon

Case number (if known)

Oth	<b>Per Necessary Expenses</b> In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	<b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$_	1,069.00
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$_	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	0.00
19.	<b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$_	752.00
20.	Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$_	0.00
21.	<b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.	\$	30.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.	_	
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	50.00
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$	7,846.87

Debtor 1 Debtor 2 Marcy L Miramon Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.							
		Note: Do not	include an	y exper	nse allowances	listed in lines 6-24.		
25.	insura	n insurance, disability insurance, and nce, disability insurance, and health save ependents.					ır	
	Health	insurance		\$	92.00			
	Disabi	lity insurance		\$	0.00			
	Health	savings account	+	⊦\$	0.00			
	Total			\$	92.00	Copy total here=>	\$	92.00
	Do you	actually spend this total amount?						
		No. How much do you actually spend?						
		Yes		\$				
26.	continu	nued contributions to the care of house ue to pay for the reasonable and necess ousehold or member of your immediate to contributions to an account of a qualifie	ary care ar family who	nd supp is unat	ort of an elderl ble to pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.	<ol> <li>Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.</li> </ol>							
	By law	, the court must keep the nature of these	e expenses	s confid	ential.		\$	0.00
28.	28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.							
	If you	believe that you have home energy costs of fill in the excess amount of home energy		more tha	an the home er	nergy costs included in expenses on line	,	
		ust give your case trustee documentation t claimed is reasonable and necessary.	n of your a	actual e	xpenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8	ation expenses for dependent childrer 83* per child) that you pay for your deper elementary or secondary school.						
		ust give your case trustee documentation d is reasonable and necessary and not a						
	* Subje	ect to adjustment on 4/01/22, and every	3 years aft	ter that t	for cases begu	n on or after the date of adjustment.	\$	150.00
30.	higher	onal food and clothing expense. The than the combined food and clothing all % of the food and clothing allowances in	owances ir	n the IR	S National Sta			
		d a chart showing the maximum additionations for this form. This chart may also be						
	You m	ust show that the additional amount claim	med is rea	sonable	and necessar	y.	\$	0.00
31.		nuing charitable contributions. The an nents to a religious or charitable organiz				ntribute in the form of cash or financial	+\$	80.00
32.		II of the additional expense deduction nes 25 through 31.	ıs.				\$	322.00

Debtor 1 Debtor 2 Marcy L Miramon Case number (if known)

Dedu	ctions for Debt Payment					
	or debts that are secured by an intere ans, and other secured debt, fill in li	est in property that you own, including hon nes 33a through 33e.	ne morto	gages, vehicle		
	o calculate the total average monthly pareditor in the 60 months after you file for	yment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to e	each secured		
	Mortgages on your home:					verage monthly syment
33a.	Copy line 9b here			=	> \$	0.00
	Loans on your first two vehicles:					
33b.	Copy line 13b here			=	> \$	297.22
33c.	Copy line 13e here			=	> \$	458.91
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes o insurance?	r	
				□ No		
	-NONE-			☐ Yes	\$	
-					-	
				□ No	•	
				_ □ Yes	\$ .	
				□ No		
				☐ Yes	+\$	
					]	
				750.40	Copy total	. 750.40
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$_	756.13	here=>	\$756.13
		secured by your primary residence, a vehi			J	
	I Yes. State any amount that you mus	It pay to a creditor, in addition to the payments is ion of your property (called the <i>cure amount</i> information below.				
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	NE-		\$	÷	60 = \$	
					1	
		То	tal \$	0.00	Copy total here=>	\$
	o you owe any priority claims such a re past due as of the filing date of you	s a priority tax, child support, or alimony - ur bankruptcy case? 11 U.S.C. § 507.	that			
	No. Go to line 36.	<del>-</del>				
		these priority claims. Do not include current or those you listed in line 19.	r			
	Total amount of all past-due p	·	\$	16,912.00 ÷	- 60 =	\$281.86

Debtor 2	Tode	d A Miramon		Cas	se nı	umber ( <i>if known</i> )			
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link for <i>Bankruptcy Basic</i> ins for this form. <i>Bankruptcy Basics</i> may also be available	cs specified						
[	□ No.	Go to line 37.							
1	Yes.	Fill in the following information.							
		Projected monthly plan payment if you were filing under	Chapter 13		\$	50	00.00		
	Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).				X	8.50	) 		
		To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.				s 42	50	Copy total	42.50
		Average monthly administrative expense if you were filing	ng under Ch	apter 13		\$ <b>72</b>		here=> \$	72.30
37.		of the deductions for debt payment. es 33e through 36.						\$	1,080.49
Tota	l Deduc	tions from Income							
38.	Add all d	of the allowed deductions.							
		ne 24, All of the expenses allowed under IRS e allowances	\$	7,846.87	7_				
	Copy lir	ne 32, All of the additional expense deductions	\$	322.00	0_				
	Copy lir	ne 37, All of the deductions for debt payment	+\$	1,080.49	9	٦			
		Total deductions	\$	9,249.30	6	Copy total	here	=> \$	9,249.36
Part 3:	Det	termine Whether There is a Presumption of Abuse							
39. (	Calculat	e monthly disposable income for 60 months							
	39a. Co	ppy line 4, adjusted current monthly income	\$	8,831.60	6				
	39b. Co	ppy line 38, <i>Total deductions</i>	-\$	9,249.30	6				
		onthly disposable income. 11 U.S.C. § 707(b)(2). obtract line 39b from line 39a	\$	-417.70	0_	Copy here=>\$		-417.70	-
	For the	next 60 months (5 years)				_	x 60	1	
							]		
	39d. <b>To</b>	tal. Multiply line 39c by 60	39d.	\$	-25	5,062.00	Copy here=:	<b>&gt;</b> \$	-25,062.00
40. <b>i</b>	Find out	whether there is a presumption of abuse. Check the b	oox that app	lies:			J		
ı	■ The I	ine 39d is less than \$8,175*. On the top of page 1 of this	s form, chec	k box 1, <i>Th</i>	ere	is no presui	mption	of abuse. Go to	o Part 5.
i		line 39d is more than \$13,650*. On the top of page 1 of t	this form, ch	eck box 2,	The	ere is a presi	umption	of abuse. You	ı may fill out
I	☐ The I	line 39d is at least \$8,175*, but not more than \$13,650°	. Go to line	41.					
*	'Subject	to adjustment on 4/01/22, and every 3 years after that for	cases filed	on or after	the	date of adju	stment.		

Marcy L Miramon

Debtor 1

Debtor 1 Debtor 2		cy L Miramon d A Miramon	Ca	se number ( <i>if</i>	known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. A Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b on the state of	I Information	\$x	.25	7	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 70 Multiply line 41a by 0.25		\$		Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting al your unsecured, nonpriority debt. ne box that applies:		ıctions is	enough to pa	ay	
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, che o Part 5.	ck box 1, <i>There</i>	is no pres	sumption of ab	ouse.	
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of tumption of abuse. You may fill out Part 4 if you claim special circumstance.					
Part 4:	Giv	ve Details About Special Circumstances					
<b>I</b> N	lo. Go 'es. Fil ite Yo ne	e alternative? 11 U.S.C. § 707(b)(2)(B).  to to Part 5.  If in the following information. All figures should reflect your average.  The results of the special circumstances to the special ci	hat make the e	xpenses o	r income adjus	stments	
	G	Sive a detailed explanation of the special circumstances	Av	verage mo income a	onthly expens adjustment	se	
	_			\$			
				\$			
	_			\$			
				\$			
Part 5:	Sig	gn Below					
	By si	gning here, I declare under penalty of perjury that the information	on this stateme	ent and in	any attachmei	nts is true	and correct.
			/s/ Todd A I				
		arcy L Miramon gnature of Debtor 1	Todd A Mira Signature of I				
Da	ite Ai	_	August 31,	2019			
	1711	, 22 ,	ו / טט / וייייי				

Debtor 1 Debtor 2 Todd A Miramon Case number (if known)

# **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 02/01/2019 to 07/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: San Diego Pension Consultants

Year-to-Date Income:

Starting Year-to-Date Income: \$2,616.00 from check dated 1/18/2019. Ending Year-to-Date Income: \$34,616.00 from check dated 7/19/2019.

Income for six-month period (Ending-Starting): **\$32,000.00**.

Average Monthly Income: \$5,333.33.

Debtor 1 Debtor 2 Todd A Miramon Case number (if known)

# **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period 02/01/2019 to 07/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Capstone tax Consulting

Year-to-Date Income:

Income for six-month period (Ending-Starting): \$20,990.00.

Average Monthly Income: **\$3,498.33**.

Revised: 1/24/13

Name, Address, Telephone No. & I.D. No. Brian Crozier Whitaker 183350 9665 Chesapeake Dr #345 San Diego, CA 92123 858-560-4335 183350 CA

## UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991

In Re Marcy L Miramon Todd A Miramon

Tax I.D. / S.S. #: xxx-xx-6076/xxx-xx-7699

Debtor.

BANKRUPTCY NO.

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA RIGHTS AND RESPONSIBILITIES OF CHAPTER 7 DEBTORS AND THEIR ATTORNEY

In order for debtors and their attorneys to understand their rights and responsibilities in the bankruptcy process, the following terms of engagement are hereby agreed to by the parties.

Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011 and the Local Bankruptcy Rules.

# I. Services Included in the Initial Fee Charged

The following are services that an attorney must provide as part of the initial fee charged for representation in a Chapter 7 case:

- 1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
- 2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
- 3. Describe the purpose, benefits, and costs of the Chapters the debtor may file, counsel the debtor regarding the advisability of filing either a Chapter 7, 11, or 13 case, and answer the debtor's questions.
- 4. Advise the debtor of the requirement to attend the Section 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
- 5. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.

- 6. Timely prepare, file and serve, as required, the debtor's petition, schedules, Statement of Financial Affairs, and any necessary amendments to Schedule C.
- 7. Provide documents pursuant to the Trustee Guidelines and any other information requested by the Chapter 7 Trustee or the Office of the United State Trustee.
- 8. Provide an executed copy of the Rights and Responsibilities of Chapter 7 Debtors and their Attorneys to the debtor.
- 9. Appear and represent the debtor at the Section 341(a) Meeting of Creditors, and any continued meeting, except as further set out in Section II.
- 10. File the Certificate of Debtor Education if completed by the debtor and provided to the attorney before the case is closed.
- 11. Attorney shall have a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.
- 12. Respond to and defend objections to claim(s) of exemption arising from attorney error(s) in Schedule C.

# Services Included as Part of Chapter 7 Representation, Subject to an Additional Fee

The following are services, included as part of the representation of the debtor, but for which the attorney may charge additional fees.

- 1. Representation at any continued meeting of creditors due to client's failure to appear or failure to provide required documents or acceptable identification;
- 2. Amendments, except that no fee shall be charged for any amendment to Schedule C that may be required as a result of attorney error;
- 3. Opposing Motions for Relief from Stay;
- 4. Reaffirmation Agreements and hearings on Reaffirmation Agreements;
- 5. Redemption Motions and hearings on Redemption Motions;
- 6. Preparing, filing, or objecting to Proofs of Claims, when appropriate, and if applicable;
- 7. Representation in a Motion to Dismiss or Convert debtor's case;
- 8. Motions to Reinstate or Extend the Automatic Stay;
- 9. Negotiations with Chapter 7 Trustee in aid of resolving nonexempt asset, turnover or asset administration issues.

# III.

# Additional Services Not Included in the Initial Fee Which Will Require a Separate Fee Agreement

The following services are <u>not</u> included as part of the representation in a Chapter 7 case, unless the attorney and debtor negotiate representation in these post-filing matters at mutually agreed upon terms in advance of any obligation of the attorney to render services. Unless a new fee agreement is negotiated between debtor and attorney, attorney will not be required to represent the debtor in these matters:

- 1. Defense of Complaint to Determine Non-Dischargeability of a Debt or filing Complaint to determine Dischargeability of Debt;
- 2. Defense of a Complaint objecting to discharge;
- 3. Objections to Claim of Exemption, except where an objection arises due to an error on Schedule C;
- 4. Sheriff levy releases;
- 5. Section 522(f) Lien Avoidance Motions;
- 6. Opposing a request for, or appearing at a 2004 examination;
- 7. All other Motions or Applications in the case, including to Buy, Sell, or Refinance Real or other Property;
- 8. Motions or other proceedings to enforce the automatic stay or discharge injunction;
- 9. Filing or responding to an appeal;
- 10. An audit of the debtor's case conducted by a contract auditor pursuant to 28 U.S.C. Section 586(f).

#### IV.

# **Duties and Responsibilities of the Debtor**

As the debtor filing for a Chapter 7 bankruptcy, you must:

- 1. Fully disclose everything you own, lease, or otherwise believe you have a right or interest in prior to filing the case;
- 2. List everyone to whom you owe money, including your friends, relatives or someone you want to repay after the bankruptcy is filed;
- 3. Provide accurate and complete financial information;
- 4. Provide all requested information and documentation in a timely manner, in accordance with the Chapter 7 Trustee Guidelines;
- 5. Cooperate and communicate with your attorney;
- 6. Discuss the objectives of the case with your attorney before you file;

- 7. Keep the attorney updated with any changes in contact information, including email address;
- 8. Keep the attorney updated on any and all collection activities by any creditor, including lawsuits, judgments, garnishments, levies and executions on debtor's property;
- 9. Keep the attorney updated on any changes in the household income and expenses;
- 10. Timely file all statutorily required tax returns;
- 11. Inform the attorney if there are any pending lawsuits or rights to pursue any lawsuits;
- 12. Appear at the Section 341(a) Meeting of Creditors, and any continued Meeting of Creditors;
- 13. Bring proof of social security number and government issued photo identification to the Section 341(a) Meeting of Creditors;
- 14. Provide date-of-filing bank statements to the attorney no later than 7 days after filing of your case;
- 15. Pay all required fees prior to the filing of the case;
- 16. Promptly pay all required fees in the event post filing fees are incurred;
- 17. Debtors must not direct, compel or demand their attorney to take a legal position or oppose a motion in violation of any Ethical Rule, any Rule of Professional Conduct, or Federal Rule that is not well grounded in fact or law.

Dated:	August 31, 2019	/s/ Marcy L Miramon
		Marcy L Miramon
		Debtor
Dated:	August 31, 2019	/s/ Todd A Miramon
Dated.		Todd A Miramon
		Debtor
Dated:	August 31, 2019	/s/ Brian Crozier Whitaker
		Brian Crozier Whitaker 183350
		Attorney for Debtor(s)

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

# This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
<u> </u>	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Southern District of California

In r	e	Marcy L Miramon Todd A Miramon			Case No			
		Tour A milanon		Debtor(s)	Chapter	7		
		DISCLOSURI	E OF COMPEN	NSATION OF ATT	ORNEY FOR D	EBTOR(S)		
1.	cor	npensation paid to me within one	ant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that the ensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to indered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
		For legal services, I have agree	d to accept		\$	865.00	_	
		Prior to the filing of this statem	ent I have received		\$	865.00	_	
		Balance Due			\$	0.00	<u> </u>	
2.	The	e source of the compensation paid	d to me was:					
		■ Debtor □ Other (s	pecify):					
3.	The	e source of compensation to be pa	aid to me is:					
		■ Debtor □ Other (s	pecify):					
4.		I have not agreed to share the ab	pove-disclosed compe	ensation with any other pers	on unless they are me	mbers and associ	ates of my law firm.	
		I have agreed to share the above copy of the agreement, together					of my law firm. A	
5.	In	return for the above-disclosed fee	e, I have agreed to rea	nder legal service for all asp	ects of the bankruptcy	case, including:		
	b. c.	Analysis of the debtor's financia Preparation and filing of any pet Representation of the debtor at the [Other provisions as needed]	ition, schedules, state	ement of affairs and plan wh	ich may be required;	-	n bankruptcy;	
6.	Ву	agreement with the debtor(s), the Representation of the any other adversary pr	debtors in any dis	does not include the follow chargeability actions, ju		ces, relief fron	n stay actions or	
				CERTIFICATION				
this		ertify that the foregoing is a compartify proceeding.	plete statement of any	agreement or arrangement	for payment to me for	representation o	f the debtor(s) in	
	Aug	ust 31, 2019		/s/ Brian Crozi	er Whitaker			
Date		Brian Crozier Whitaker 183350						
				Signature of Atto Lifeline Legal,	•			
				9665 Chesape	ake Dr #345			
				San Diego, CA	.92123 Fax: 619-512-5123			
				brian@lifelinel				
				Name of law firm				

CSD 1008 [08/21/00] Name, Address, Telephone No. & I.D. No. Brian Crozier Whitaker 183350 9665 Chesapeake Dr #345 San Diego, CA 92123 858-560-4335 183350 CA UNITED STATES BANKRUPS			
SOUTHERN DISTRICT OF CAI 325 West "F" Street, San Diego, Cai			
In Re Marcy L Miramon Todd A Miramon		BANKRUPTCY NO.	
	Debtor.		
VER	IFICATION OF CREDITO	R MATRIX	
PART I (check and complete one):			
New petition filed. Creditor diskette required.	TOTAL NO. OF CREDITORS: 43		
□ Conversion filed on See instructio □ Former Chapter 13 converting. Creditor □ Post-petition creditors added. Scannab. □ There are no post-petition creditors. No	TOTAL NO. OF CREDITORS:		
Amendment or Balance of Schedules filed concur Equity Security Holders. See instructions on reve ☐ Names and addresses are bein ☐ Names and addresses are bein	erse side. ng ADDED. ng DELETED.	le matrix affecting Schedule of Debts and/or Schedule of	
PART II (check one):			
The above-named Debtor(s) hereby verifies that t	he list of creditors is true and cor	rect to the best of my (our) knowledge.	
☐ The above-named Debtor(s) hereby verifies that t the filing of a matrix is not required.	here are no post-petition creditor	s affected by the filing of the conversion of this case and that	
Date: August 31, 2019	/s/ Marcy L Miramon		
	Marcy L Miramon Signature of Debtor		
Date: August 31, 2019	/s/ Todd A Miramon Todd A Miramon Signature of Debtor		

# Case 19-05335-LA7 Filed 09/01/19 Entered 09/01/19 00:37:04 Doc 1 Pg. 76 of 81

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#### **INSTRUCTIONS**

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with Verification is required whenever the following occurs:
  - a) A new petition is filed. Diskette required.
  - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
  - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be <u>originally</u> typed or printed. It may not be a copy.
- 4) CONVERSIONS:
  - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a Verification. Diskette required.
  - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and <u>Verification</u> must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
  - a) <u>Scannable matrix format required.</u>
  - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
  - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the **REVERSE** side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

Ad Astra Recovery Serv 7330 W 33rd St N Ste 118 Wichita, KS 67205

American Credit Accept 961 E Main St Spartanburg, SC 29302

Bc Services Inc 550 Disc Dr Longmont, CO 80503

CEP America California PO Box 582663 Modesto, CA 95358-0070

Colorado Department of Revenue 1375 Sherman St, Rm 504 Denver, CO 80261-0004

Conn Appliances Inc c/o Becket and Lee LLP PO Box 3002 Malvern, PA 19355-1245

Conns Credit Corp 3295 College St Beaumont, TX 77701

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Costnwpkw1 PO Box 702118 San Antonio, TX 78270 Credit One Bank Na Po Box 98875 Las Vegas, NV 89193

E470 Public Higway Authority 22470 E 6th Pkwy #100 Aurora, CO 80018

ECMC 111 Washington Ave South #1400 Minneapolis, MN 55401

ECMC PO Box 16408 Saint Paul, MN 55116-0408

Express Toll 22470 6th Parkway #110 Aurora, CO 80018

Family Support Divisio 330 W Broadway Ste 700 San Diego, CA 92101

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Franchise Tax Board Bankruptcy Section MS A340 PO Box 2952 Sacramento, CA 95812-2952

Guaranty Bank 1650 Pace St Longmont, CO 80504 I C System Inc Po Box 64378 Saint Paul, MN 55164

Internal Revenue Service Centralized Insolvency Op PO Box 7346 Philadelphia, PA 19101-7346

LVNV Funding LLC, assignee of FNBM LLC, Resurgent Capital Se PO Box 10587 Greenville, SC 29603-0587

North American Recover 1600 W 2200 S Ste 410 West Valley City, UT 84119

NPRTO California, LLC 256 W Data Dr Draper, UT 84020

One Main Financial Po Box 1010 Evansville, IN 47706

Onemain Po Box 1010 Evansville, IN 47706

OneMain PO Box 3251 Evansville, IN 47731

Palomar Health Processing Center 2600 University Pkwy Coralville, IA 52241-3201 Palomar Health PO Box 748696 Los Angeles, CA 90074-8696

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Premier Bankcard LLC Jefferson Capital Systems PO Box 7999 Saint Cloud, MN 56302-9617

Prestige Financial Services BK Department PO Box 26707 Salt Lake City, UT 84126

Prestige Financial Svc 1420 S 500 W Salt Lake City, UT 84115

Professional Finance C 5754 W 11th St Ste 100 Greeley, CO 80634

Quantum3 Group LLC as agent fo Sadino Funding LLC PO Box 788 Kirkland, WA 98083-0788

Quantum3 Group LLC as agent fo MOMA Funding LLC PO Box 788 Kirkland, WA 98083-0788

Receivable Management 240 Emery Street Bethlehem, PA 18015 San Diego DCSS PO Box 122031 San Diego, CA 92112-2031

San Diego Imaging Medical Grp PO Box 23540 San Diego, CA 92193-3540

State of Colorado Department of Revenu PO Box 17087 Denver, CO 80217-0087

Valley Path Med Assoc Inc PO Box 744127 Dallas, TX 75374

Verizon by American InfoSource LP PO Box 248838 Oklahoma City, OK 73124-8838

Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303

White Hills Cash dba Island Finance LLC PO Box 330 Hays, MT 59527